

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2516647
Decision Date:	2/25/2026	Hearing Date:	12/12/2025
Hearing Officer:	Christine Therrien	Record Open to:	12/31/2025

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dr. Raymond Martin, Benecare



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Dental Services – General Dental
Decision Date:	2/25/2026	Hearing Date:	12/12/2025
MassHealth’s Rep.:	Dr. Raymond Martin	Appellant’s Rep.:	Pro se
Hearing Location:	Tewksbury MassHealth Enrollment Center Telephonic		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated 10/7/25, MassHealth denied the appellant's request for prior authorization for dental code D2740 Crown – porcelain/ceramic because MassHealth determined the requested dental service did not meet the prosthesis replacement requirements. (130 CMR 420.421(B) and Exhibit 1). The appellant filed this appeal in a timely manner on 11/12/25. (130 CMR 610.015(B) and Exhibit 2). Denial of a request for prior authorization is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant’s request for prior authorization for dental code D2740 Crown – porcelain/ceramic.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 420.421(B), in denying dental code D2740 Crown – porcelain/ceramic, because the requested dental service did not meet the prosthesis replacement requirements.

Summary of Evidence

MassHealth was represented telephonically by a dental consultant with BeneCare, the agent of MassHealth that makes prior authorization determinations for dental services. The appellant is over age ■■■. On 10/7/25, the appellant's dental provider submitted a request for prior authorization for dental code D2740 Crown – porcelain/ceramic, for the appellant's teeth numbers 13, 9, 8, and 6. (Exhibit 5). The appellant's dental provider submitted X-rays of the appellant's teeth. (Exhibit 5). The appellant's dental provider did not include any information regarding the need to replace the crowns, and did not submit a medical necessity narrative. On 10/7/25, MassHealth denied the prior authorization request because the requested dental service did not meet the prosthesis replacement requirements. The dental consultant testified at hearing that he did not have information as to when the crowns were originally placed, and the information was not in the records provided for the hearing.

The MassHealth Dental Program *Office Reference Manual*, published February 1, 2026, states that crowns are expected to last 5 years from the date of fabrication and placement.¹ The denial notice states that the request does not meet the prosthesis replacement requirements; the dental consultant did not testify as to what exactly in the request did not meet the requirements. The dental consultant testified that he does not have enough information to approve the prior authorization request.

The appellant submitted a letter from her infectious disease physician with her appeal that stated the appellant had been in a coma, and while in the coma, her crowns fell out. The appellant testified that she has the crowns and needed them to be put back on her teeth.

The dental consultant testified that he would need the appellant's dental records showing the date the crowns fell out and how it occurred.

The record was left open until 12/29/25 to allow the appellant time to submit supporting documents. The record was left open until 12/31/25 to give the dental consultant time to review and respond.

¹ The current MassHealth Dental Program, *Office Reference Manual* is the same as the previously published version, in effect in October, 2025, except for the name of MassHealth's Dental Third-Party Administrator, which was updated on 2/1/26. See, <https://www.mass.gov/doc/masshealth-dental-program-office-reference-manual-0/download>.

The appellant did not submit anything during the record open period.

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. MassHealth was represented telephonically by a dental consultant with BeneCare, the agent of MassHealth that makes prior authorization determinations for dental services.
2. The appellant is over age [REDACTED]
3. On 10/7/25, the appellant's dental provider submitted a request for prior authorization for dental code D2740 Crown – porcelain/ceramic for the appellant's teeth numbers 13, 9, 8, and 6. (Exhibit 5).
4. The appellant's dental provider submitted X-rays of the appellant's teeth. (Exhibit 5).
5. The appellant's dental provider did not include, with the PA request, any information regarding the need to replace the crowns and did not submit a medical necessity narrative.
6. On 10/7/25, MassHealth denied the prior authorization request because the requested dental service did not meet the prosthesis replacement requirements.
7. The dental consultant did not know when the crowns were originally placed.
8. The MassHealth Dental Program *Office Reference Manual*, published February 1, 2026, states that crowns are expected to last 5 years.
9. The denial notice states that the request does not meet the prosthesis replacement requirements; the dental consultant did not testify as to what exactly did not meet the requirements.
10. The appellant submitted a letter from her infectious disease physician with her appeal that stated the appellant had been in a coma, and while in the coma, her crowns fell out.
11. The appellant has the crowns and needs them to be put back on her teeth.
12. The dental consultant testified that he would need the appellant's dental records showing the date the crowns fell out and how it occurred.
13. The record was left open until 12/29/25 to allow the appellant time to submit supporting

documents. The record was left open until 12/31/25 to give the dental consultant time to review and respond.

14. The appellant did not submit anything during the record open period.

Analysis and Conclusions of Law

MassHealth only pays for medically necessary services established through the prior authorization process. 130 CMR 420.410(D)(1) states that “[p]rior authorization determines only the medical necessity of the authorized service and does not establish or waive any other prerequisites for payment such as member eligibility, the availability of other health-insurance payment, or whether the service is a covered service.” Additionally, 130 CMR 420.410(C)(1) indicates that “[t]he provider is responsible for including with the request for prior authorization appropriate and sufficient documentation to justify the medical necessity for the service.”

130 CMR 420.425(C)(2)(b), entitled Crowns, Posts, and Cores, states that for members 21 years of age and older, the MassHealth agency pays for porcelain or ceramic crowns on permanent incisors, cuspids, bicuspid, and first and second molars. MassHealth will pay chairside crown repair for all members, and a description of the repair must be documented in the member’s dental record. (130 CMR 420.425(E)).

The prior authorization request was for dental code D2740 Crown – porcelain/ceramic, which requires proper documentation in the appellant’s dental records. It is unclear if the denial is based on the length of time that has elapsed since the appellant had the crowns placed or if it is solely based on missing documentation. The appellant failed to submit any supporting documentation regarding the repair of the crowns that fell out while she was in a coma. The hearing record was left open for the appellant to submit additional dental records to support her PA request; nothing was received.

For this reason, the appeal is **denied**.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to court in accordance with Chapter

30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Christine Therrien
Hearing Officer
Board of Hearings

cc: MassHealth Representative: BeneCare 1, Attn: Christine Sobolewski